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**Swatara Township**  
599 Eisenhower Boulevard  
Harrisburg, PA 17111-2397  
[www.swataratwp.com](http://www.swataratwp.com)

**Building & Codes Department**  
Office Hours: Monday – Friday 8:00 AM – 4:30 PM  
Phone: 717-564-2551 Fax: 717-564-5895  
Email: [directorofpz@swataratwp.com](mailto:directorofpz@swataratwp.com)

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All of the following must be submitted at the same time in order for an application to be complete and for the Township to begin the review process:

1. **APPLICATION** completed in full with the applicant and owner signatures.
2. **SITE PLAN** drawing or satellite image of entire property clearly indicating the proposed work location with set back distances to the lot lines, existing structures, known easements, streets and alleys, and property lines.
3. **FEES** – Permit fees must be submitted at time of application. Payment may be made by check, cash, or credit card. If paying by check, please make the check payable to “Swatara Township.” There is a 2.2% service fee for credit and debit card transactions.
  - a. **New construction and additions:** cost of construction (including labor and materials) in thousands of dollars times \$5.00 per thousand **OR** a minimum fee of \$75.00, whichever is greater.  
\$\_\_\_\_\_ (cost of construction) x 0.005 = \$\_\_\_\_\_ (application fee).
  - b. **Accessory structures** (sheds, fences, decks, pools, signs): \$75.00
  - c. Fees are subject to change at any time by Resolution from the Board of Commissioners.
4. Supplemental information to be included with the application (**if applicable**):
  - a. If the applicant is a contractor, or if a property owner is hiring a contractor, then the Township requires a **CERTIFICATE OF INSURANCE** showing proof of the current worker’s compensation insurance coverage, naming Swatara Township as the Certificate Holder, **OR** if the applicant is the property owner or is hiring a self-employed contractor with no employees, then a notarized **WORKER’S COMPENSATION AFFIDAVIT OF EXEMPTION** form is required. Notary service is available at the Township for a \$5.00 cash fee.
  - b. All contractors working in the Township must obtain a **BUSINESS PRIVILEGE LICENSE**. Please contact the Business Privilege Tax Officer, Jennifer Reichwein, at [jreichwein@swataratwp.com](mailto:jreichwein@swataratwp.com) or 717-564-2551, for more information on use of forms and filing procedures.
  - c. **STORMWATER MANAGEMENT PERMIT:**
    - Minor Stormwater Management Permit: if the project involves 1,000 – 2,999 square feet of new impervious.
    - Major Stormwater Management Permit: if the project involves 3,000+ square feet of new impervious.
    - Fee: \$150.00 + escrow of \$500.00 for residential projects or \$1,000.00 for commercial plans.

Zoning permit applications will be reviewed within fifteen (15) business days. The Zoning Officer will contact the applicant if there are any questions or concerns. Building permit applications may be submitted at the same time as the zoning permit application, but the zoning permit must be approved before the building permit is reviewed and issued. The applicant will be contacted when the permit is ready for pick-up.



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Property Address: \_\_\_\_\_

Tax Parcel ID: 63-\_\_\_\_\_ - \_\_\_\_\_. Note: you can find your property's ID # here: [Dauphin County, PA Parcel Viewer](#)

Scope of Work: \_\_\_\_\_

**SIZE OF PROPOSED STRUCTURE**

Length: \_\_\_\_\_

Width: \_\_\_\_\_

Height: \_\_\_\_\_

Sq. Footage: \_\_\_\_\_

**FLOODPLAIN**

Is the site located within an identified flood prone area?  Yes  No

Will any portion of the flood prone area be developed?  Yes  No  Not Applicable

**ESTIMATED VALUE**

\$ \_\_\_\_\_

Estimated value of work must include labor and materials.

**OWNER**

\_\_\_\_\_

Owner's Name (print)

\_\_\_\_\_

Address

\_\_\_\_\_

City State Zip Code

\_\_\_\_\_

Email Phone

**APPLICANT**  Same as owner

\_\_\_\_\_

Applicant's Name (print)

\_\_\_\_\_

Address

\_\_\_\_\_

City State Zip Code

\_\_\_\_\_

Email Phone

**CONTRACTOR**  Same as owner  Same as applicant

\_\_\_\_\_

Contractor's Name (print)

\_\_\_\_\_

Address

\_\_\_\_\_

City State Zip Code

\_\_\_\_\_

Email Phone

**BUSINESS PRIVILEGE LICENSE**  Not applicable

License Number: \_\_\_\_\_

The undersigned applicant hereby applies for a Zoning Permit as required by Chapter 295 of the Swatara Township Code of Ordinances. The permit will be issued by the Township Zoning Officer based on the information contained in this application and supporting documents. The applicant hereby certifies that the information provided is true and correct. The approval or denial of this application may be appealed to the Township Zoning Hearing Board. Any oversight or omission during the review process is not a waiver of the requirements of the Ordinances and does not relieve the applicant from compliance therewith. It is the responsibility of the property owner to establish property lines prior to construction.

\_\_\_\_\_  
Signature of Applicant/Authorized Representative (if different than owner)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date